Docket No.:

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DEC 2 2 2004

# ZILKA · KOTAB

95 SOUTH MARKET ST., SUITE 420 SAN JOSE, CA 95113

NAIIP009/01.114.01

SVIPG

TELEPHONE (408) 971-2573 FAX (408) 971-4660

App. No: 09/895,535

#### **FAX COVER SHEET**

Date:	December 22, 2004	Phone Number	Fax Number
То:	Examiner B. Alies		(703) 872-9306
From:	Kevin J. Zilka		

Message:	
Please deliver to Examiner Alies.	
Thank you,	
Kevin J. Zilka	

☐ Original to follow Via Regular Mail X Original will Not be Sent ☐ Original will follow Via Overnight Courier

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IF YOU DO NOT RECEIVE ALL PAGES OR IF YOU ENCOUNTER
ANY OTHER DIFFICULTY, PLEASE PHONE \_\_\_\_\_Erica\_\_\_\_
AT (408) 971-2573 AT YOUR EARLIEST CONVENIENCE

December 31, 2098

Sir:

(Revised 1796)

PATENT IN THE UNITED STATES PATENT AND TRADEMARK OFFICE In re application of: ) Magdych et al. Group Art Unit: 2142 ٤ Application No. 09/895,535 ) Ex.: Alies, Benjamin A. Filed: June 29, 2001 Date: December 22, 2004 DEC 2 2 2004 For: SYSTEM, METHOD AND COMPUTER) PROGRAM PRODUCT FOR IMPROVED EFFICIENCY IN NETWORK ASSESSMENT) **UTILIZING A PORT STATUS** PRE-QUALIFICATION PROCEDURE CERTIFICATE OF FACSIMILE I hereby certify that this correspondence is being facsimile transmitted to the Commissioner for Patents, Alexandria, VA,22313-1450 or facsimile number: (703) 872-9306 on the above date. Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450 Transmitted herewith is an amendment in the above-identified application. The fee has been calculated as shown below. Claims Remaining Highest After Previously Present SMALL ENTITY LARGE ENTITY Paid For Extra Amendment RATE FEE OR RATE FEE TOTAL CLAIMS 02 OR X25 =\$ X50 =\$100 INDEP CLAIMS 05 05 00 X100 = \$OR X200 = \$0[ ] Multiple Dependent Claim Present \$130 \$0 and Fee Not Previously Paid TOTAL \$100.00 Applicant(s) hereby petition for a month extension of time to respond to the outstanding Office Action. Applicant(s) believe that no Extension of Time is required; however, if it is determined that such an extension is required, Applicant(s) hereby petition that such an extension be granted and authorize the Commissioner to charge the required fees for an Extension of Time under 37 CFR 1.136 to Deposit Account No. 50-1351. Enclosed is our Check No. in the amount of \$ to cover the additional claim fee and/or extension of time fees. If the required fees are missing or any additional fees are required to facilitate filing the enclosed response, please charge such fees or credit any overpayment to Deposit Account No. 50-1351 (Order No. NAI1P009). A copy of this sheet is enclosed for billing purposes. Respectfully submitted, Kevin Y. Zilka Registration No. 41,429 P.O. Box 721120 San Jose, CA 95172-1120 Telephone: (408) 971-2573

**PATENT** 

IN THE UNITED	CTATEC	DATENIT	AND	TDADEMARK	OFFICE
IN THE UNITED	SIAIES	PAIENI	AND	IKADEMAKN	<u>COMPLE</u>

In re application of:	.,	· 7 · 4
Magdych et al.	) ) ) Group Art Unit: 2142	RECEIVED CENTRAL FAX CENTER
Application No. 09/895,535	) Ex.: Alies, Benjamin A.	DEC 2 2 2004
Filed: June 29, 2001	) Date: December 22, 2004	
For: SYSTEM, METHOD AND COMPUTE PROGRAM PRODUCT FOR IMPROVED EFFICIENCY IN NETWORK ASSESSMEN' UTILIZING A PORT STATUS PRE-QUALIFICATION PROCEDUKE		

CERTIFICATE OF FACSIMILE

I hereby cortify that this correspondence is being facsimile transmitted to the Commissioner for Patents, Alexandria, VA 22313-1450 by facsimile number: (703) 872-9306 on the above date.

Signed:

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated as shown below.

	Claims Remaining After <u>Amendment</u>	Highest Previously <u>Paid For Extra</u>	Present	SMALL ENTI	TY	OR	LARGE ENTITY RATE FEE	
TOTAL CLAIMS		23	_02	X25 = \$	OR	X50 =	\$100	
INDEP CLAIMS		_05	_00	X100 = \$	OR	X200 =	\$0	
[ ] Multiple Dependent Claim Present and Fee Not Previously Paid			\$130			\$0		
		TOTAL	\$			\$ <u>100.00</u>		

Applicant(s) hereby petition for a month extension of time to respond to the outstanding Office Action.

Applicant(s) believe that no Extension of Time is required; however, if it is determined that such an extension is required, Applicant(s) hereby petition that such an extension be granted and authorize the Commissioner to charge the required fees for an Extension of Time under 37 CFR 1.136 to Deposit Account No. 50-1351.

Enclosed is our Check No. in the amount of 
to cover the additional claim fee and/or extension of time fees.

If the required fees are missing or any additional fees are required to facilitate filing the enclosed response, please charge such fees or credit any overpayment to Deposit Account No. 50-1351 (Order No. NAI1P009). A copy of this sheet is enclosed for billing purposes.

Respectfully submitted, Zilla Kotab, PC

Kevin J. Zilka Registration No. 41,429

P.O. Box 721120 San Jose, CA 95172-1120 Telephone: (408) 971-2573

(Revised 1796)

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CERTIFICATE OF FACSIMILE
I hereby certify that this correspondence is being facsimile transmitted to the Commissioner for Patents, Alexandria, VA 22313-1450 at facsimile number: 703) 872-9306 on the above date

igned:

### AMENDMENT A

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

In response to an Office Action mailed on 11/15/04, please enter the following in the above application: